



Docket No.81045.1034

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:)
K. Shoji Kiyohara)
Serial No: 09/691,791)
Filed: February 26, 2001)
For: METHOD AND APPARATUS FOR)
REGENERATING MESSAGE DATA)
Group Unit: 2152)

RESPONSE TO NOTICE TO FILE MISSING PARTS

BOX MISSING PARTS
Assistant Commissioner for Patents
Washington, D. C. 20231

Sir:

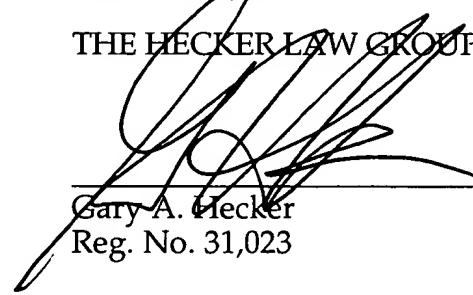
Responsive to the Notice to File Missing Parts of Application with a mailing date of January 5, 2001, Applicants have enclosed the following:

1. A check in the total amount of \$840, consisting of basic filing fee (\$710.00), surcharge fee as set forth in 37 CFR. §1.16(e) (\$130.00);
2. Signed Declaration/Power of Attorney by inventor Keith Shoji Kiyoohara;
3. A copy of the Missing Parts Notice;

4. Certificate of Mailing by First Class Mail; and
5. A return receipt postcard.

Respectfully submitted,

THE HECKER LAW GROUP


Gary A. Hecker
Reg. No. 31,023

Date: March 1, 2001

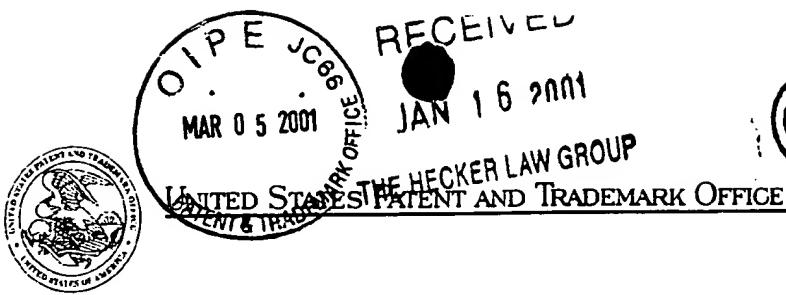
THE HECKER LAW GROUP
1925 Century Park East
Suite 2300
Los Angeles, California 90067
(310) 286-0377

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with sufficient postage with the United States Postal Service as First Class Mail in an envelope addressed to BOX MISSING PARTS, Assistant Commissioner for Patents, Washington, D.C. 20231 on March 1, 2001.



Signature: Laura Forbes Date: March 1, 2001



COPY

COMMISSIONER FOR PATENTS
 UNITED STATES PATENT AND TRADEMARK OFFICE
 WASHINGTON, D.C. 20231
 www.uspto.gov

STANIPS

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/691,791	10/18/2000	Keith Shoji Kiyohara	81045.1034

FORMALITIES LETTER

Gary A Hecker
 The Hecker Law Group
 1925 Century Park East
 Suite 2300
 Los Angeles, CA 90067



OC000000005658573

Date Mailed: 01/05/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

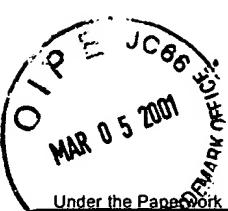
An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 840.**

*A copy of this notice **MUST** be returned with the reply.*

WILLIAMS
 Customer Service Center
 Initial Patent Examination Division (703) 308-1202
 PART I - ATTORNEY/APPLICANT COPY

03/07/2001 NGUYEN 00000063 09691791
 710.00 00
 130.00
 01 FC:101 02 FC:105
 03/07/2001 5/01



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 40)

Complete if Known

Application Number	09/691,791
Filing Date	October 18, 2000
First Named Inventor	K. shoji Kiyohara
Examiner Name	Unassigned
Group Art Unit	2152
Attorney Docket No.	81045.1034

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number
Deposit Account Name

Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status.
See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	<input type="text"/>
106	320	206	160	Design filing fee	<input type="text"/>
107	490	207	245	Plant filing fee	<input type="text"/>
108	710	208	355	Reissue filing fee	<input type="text"/>
114	150	214	75	Provisional filing fee	<input type="text"/>

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	6	-20** =	0	X	<input type="text"/>	= <input type="text"/>	Fee from below	Fee Paid
Independent Claims	1	- 3** =	0	X	<input type="text"/>	= <input type="text"/>		
Multiple Dependent					<input type="text"/>	= <input type="text"/>		

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	<input type="text"/>
102	80	202	40	Independent claims in excess of 3	<input type="text"/>
104	270	204	135	Multiple dependent claim, if not paid	<input type="text"/>
109	80	209	40	** Reissue independent claims over original patent	<input type="text"/>
110	18	210	9	** Reissue claims in excess of 20 and over original patent	<input type="text"/>

SUBTOTAL (2) (\$)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	<input type="text"/>
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>
139	130	139	130	Non-English specification	<input type="text"/>
147	2,520	147	2,520	For filing a request for ex parte reexamination	<input type="text"/>
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>
115	110	215	55	Extension for reply within first month	<input type="text"/>
116	390	216	195	Extension for reply within second month	<input type="text"/>
117	890	217	445	Extension for reply within third month	<input type="text"/>
118	1,390	218	695	Extension for reply within fourth month	<input type="text"/>
128	1,890	228	945	Extension for reply within fifth month	<input type="text"/>
119	310	219	155	Notice of Appeal	<input type="text"/>
120	310	220	155	Filing a brief in support of an appeal	<input type="text"/>
121	270	221	135	Request for oral hearing	<input type="text"/>
138	1,510	138	1,510	Petition to institute a public use proceeding	<input type="text"/>
140	110	240	55	Petition to revive - unavoidable	<input type="text"/>
141	1,240	241	620	Petition to revive - unintentional	<input type="text"/>
142	1,240	242	620	Utility issue fee (or reissue)	<input type="text"/>
143	440	243	220	Design issue fee	<input type="text"/>
144	600	244	300	Plant issue fee	<input type="text"/>
122	130	122	130	Petitions to the Commissioner	<input type="text"/>
123	50	123	50	Processing fee under 37 CFR 1.17(q)	<input type="text"/>
126	180	126	180	Submission of Information Disclosure Stmt	<input type="text"/>
581	40	581	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>
179	710	279	355	Request for Continued Examination (RCE)	<input type="text"/>
169	900	169	900	Request for expedited examination of a design application	<input type="text"/>
Other fee (specify) <input type="text"/>					

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 40)

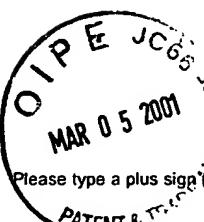
SUBMITTED BY

Complete if applicable

Name (Print/Type)	Gary A. Hecker	Registration No. (Attorney/Agent)	31,023	Telephone	310 - 286-0377	
Signature					Date	February 27, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/691,791	
		Filing Date	October 18, 2000	
		First Named Inventor	K. SHOJI KIYOHARA	
		Group Art Unit	2152	
		Examiner Name	Unassigned	
Total Number of Pages in This Submission		5	Attorney Docket Number	81045.1034

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Recordation cover sheet; Assignment; \$40 check; postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	The Hecker Law Group By: Gary A. Hecker
Signature	
Date	March 1, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Typed or printed name	Laura Forbes		
Signature		Date	March 1, 2001

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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		Group Art Unit	2152	
		Examiner Name	Unassigned	
Total Number of Pages in This Submission		8	Attorney Docket Number	81045.1034

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Copy of Missing Parts Notice; \$840 check; Declaration and Power of Attorney; Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	The Hecker Law Group By: Gary A. Hecker
Signature	
Date	March 1, 2001

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Typed or printed name	Laura Forbes
Signature	
Date	March 1, 2001

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